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FM AMEMBASSY PORT MORESBY
TO RUEHC/SECSTATE WASHDC 5692
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UNCLAS SECTION 01 OF 03 PORT MORESBY 000225

SIPDIS

DEPT FOR EAP/ANP DOUG CAREY
DEPT ALSO FOR OES/IHB
DEPT ALSO AID/GH/HIDN
USDA PASS TO APHIS
HHS PASS TO CDC
BANGKOK FOR REO AND USAID/RDMA
SINGAPORE FOR RMO
JAKARTA FOR RMO

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SUBJECT: PAPUA NEW GUINEA DISASTER UPDATE -- DISEASE OUTBREAKS
DECLINE IN MOROBE, INCREASE IN MADANG

REF: PORT MORESBY 000121

PORT MORES 00000225 001.2 OF 003

11. Summary: The Government of Papua New Guinea (PNG) declared a State Of Emergency in September to address outbreaks of cholera, dysentery and A(H3) seasonal human influenza in Morobe Province.

According to the World Health Organization's (WHO) latest Situation Report, the number of new cases reported on a weekly basis is decreasing slightly. In Madang Province, however, a new outbreak has resulted in 237 clinical cases, seven cumulative laboratory confirmed cases and one death. PNG has not requested foreign donor assistance, but other countries and international organizations including Australia, the European Union, and the International Committee of the Red Cross (ICRC) have provided assistance through medical supplies and funding. Most foreign assistance is administered through the Department of Health in collaboration with WHO and with the assistance of Medecins Sans Frontiers/Doctors Without Borders (MSF). End Summary.

Progress Against Disease Outbreaks In Morobe

12. The Government of Papua New Guinea (PNG) declared a State Of Emergency in September to address outbreaks of cholera, dysentery and A(H3) seasonal human influenza in Morobe. According to the World Health Organization's (WHO) latest Situation Report, the number of new cases reported on a weekly basis is decreasing slightly.

13. At the Angau Cholera Treatment Center in Morobe capital Lae, PNG's second largest city, admission of patients has declined from 10 per day to about 1 per day. Authorities believe there is still a need for awareness-raising activities in the village of Situm as many cases of cholera continued to originate from there. As of September 23, WHO reported a total of 296 cholera cases with 18 deaths, 1262 dysentery cases with 44 deaths and 4917 influenza cases with 62 deaths.

Health Authorities Create New Institutions

14. Morobe's provincial authorities have established a Provincial Outbreak Response Committee (PORC) to deal with the outbreaks with assistance from the National Department of Health (NDoH) and partner agencies. The PORC is made up of representatives of relevant national and provincial authorities and is co-chaired by the Provincial Health Advisor and Provincial Health Director.

The co-chairs operate a Coordination and Command Center at the Lae Provincial Health Office with the support of WHO. To ensure a coordinated and efficient response, PORC has grouped work into six sectors, case management, surveillance, logistics, water and sanitation and environmental activities, communication/outreach and coordination. Sector leaders are responsible for coordinating and leading the work of their group.

15. The PORC launched a free 511 hotline September 28. (A similar hotline for Madang is pending.) The hotline received 149 calls on the first day, exceeding the capacity of three

PORT MORES 00000225 002.2 OF 003

operators to answer; the Center needs additional funding to increase capacity. Digicel, a PNG mobile phone company, has indicated it can provide more free lines but funds are needed to hire additional operators and keep the line open more hours; it currently operates from 9:00 am to 5:00 pm.

16. A Cholera Treatment Center with isolation ward operates at Angau Hospital with a capacity of 50 patients. The Center, supported by MSF, can treat patients from Lae and surrounding areas. The mortality rate of patients reaching the center is low.

Greatest Challenge Lies In Remote Menyamya

17. The greatest challenge appears to lie in assisting patients in more remote areas. WHO cites continuous problems, compounded by communications difficulties, in the village of Menyamya. Health workers there require rations and advances, water and sanitation at health centers is still a major concern, and there is a need for water and sanitation environmental health staff to conduct surveys and provide guidance regarding improvements needed for health centers. Menyamya also requires installation of pit latrines and communication with the community regarding sanitation.

18. A medical team was dispatched to Menyamya to support the response, but faces challenges due to limited facilities and the difficulty in bringing supplies to the area. Stocks of ciprofloxacin are very limited and are urgently needed to combat

shigella (dysentery.) Only 2200 units remain, enough to treat 220 patients. Area Medical Store (PNG) is responding to requests from health centers. A WHO survey of water and sanitary conditions at Menyamya's health centers highlighted the need for significant improvements at health centers.

Dysentery and Cholera Reach Madang

¶9. A new outbreak in Madang has resulted in 237 clinical cases, seven cumulative laboratory-confirmed cases and one death. Madang's Provincial Health Coordinator Markus Katchau declared a dysentery and cholera outbreak November 1 and set up a Task Force which meets daily. The concentration of cholera and watery diarrhea is greatest in the municipality of Madang's Sisiak Settlement, which contains about 500 households.

¶10. The WHO Situation Report confirmed that Modilon Hospital prepared ten "Cary Blair" sample taking instruments for each affected district for outbreak investigation and distribution. The tuberculosis program Edna began active surveillance of affected areas for data management November 4. Water and sanitary advisors from WHO and NDoH arrived in Madang in early November. World Vision has supplied 200 10 liter (2.6 gallon) jerrycans. WHO has stated that surplus jerrycans and aquatabs

PORT MORES 00000225 003.2 OF 003

in Lae will be sent to Madang.

¶11. Australia and New Zealand media have devoted a great deal of attention to the outbreaks in Madang. A press conference was held for them November 2.

PNG Receives Donor Assistance Despite Not Asking

¶12. PNG has not requested foreign donor assistance. Nevertheless, other countries and international organizations including Australia, the European Union, and the ICRC have provided assistance through medical supplies and funding. Most foreign assistance is administered through the Department of Health in collaboration with WHO and with the assistance of Medecins Sans Frontiers/Doctors Without Borders (MSF).

¶13. A large number of other partners are also contributing to the outbreak response, including the PNG Defense Forces (PNGDF), international and national NGOs, UN agencies and the private sector. WHO and UNICEF have recently submitted funding proposals to the European Community's Humanitarian Aid Office (ECHO) for 250,000 Euros (USD 363,134) and 260,000 Euros (USD 388,059) respectively to assist in overcoming the outbreaks.

Comment

¶14. On several occasions, we indicated to Government authorities our willingness to look into the possibility of USG assistance in dealing with the various disease outbreaks. We can only speculate on why PNG has not yet requested any foreign assistance. Money the Government has already budgeted for these outbreaks has not yet been distributed at the local level. With

this in mind, some speculate the Government may not wish to request foreign assistance since this could encourage Parliament members from the Opposition to question why the already budgeted monies have not yet been spent.

TAYLOR